Form # P 04

## DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK **CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

This is to certify that\_

AT 98 CLARK ST

this department.

PERMIT	Perfinit Neimber 1989 7H
T HEM PALL Y Pollard Bu. rs /	JUN 3 0 2008

has permission to \_\_\_\_\_Repair/replace rear steps

MAIER LYDIA F & MERR

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and u

ctures, and of the application on file in of buildings and fication inspe n mus en permi on procu n and w

ding or

JR NOTICE IS MEQUIRED.

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ine and of the

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

epting this permit shall comply with all cances of the City of Portland regulating

Apply to Public Works for street line and grade if nature of work requires such information.

OTHER REQUIRED APPROVALS

Fire Dept. Health Dept. **Appeal Board** Other

Department Name

PENALTY FOR REMOVING THIS CARD

City of Portland, Main	e - Building or Use	Permi	t Application	,	Issue Date	<b>::</b>	CBL:	
389 Congress Street, 0410	01 Tel: (207) 874-8703	3, Fax:	(207) 874-871	6 08-07	71		057 C03	33001
Location of Construction:	Owner Name:			Owner Address:			Phone:	
98 CLARK ST	MAIER LYD	IAF&	MERRITT T	98 CLARK S	Γ			
Business Name:	Contractor Name	e:		Contractor Adda	ess:		Phone	
	Pollard Builde	ers / Ber	n Pollard		omenade Portla	ınd	20777657	11
Lessee/Buyer's Name	Phone:			Permit Type:				Zone: 7
				Alterations -	Duplex			RT
Past Use:	Proposed Use:			Permit Fee:	Cost of Wo	rk:	CEO District:	7
2 Unit building	2 units building	lding - Repair/ replace		\$40.0	0 \$2,0	00.00	0.00 2	
	rear steps			FIRE DEPT:	Approved	INSPEC	CTION:	~
					Denied	Use Gro	oup: 163	Type: 573
						-		
						-	IKC U	703
Proposed Project Description:							IRC 2	
Repair/ replace rear steps				Signature:		Signatur	re: d~ 6	13708
				PEDESTRIAN A	CTIVITIES DIS	TRICT (P	P.A.D.)	
				Action: A	proved Ap	proved w/0	Conditions	Denied
				<u> </u>				
D 1/2 D	To			Signature:			Date:	
Permit Taken By: ldobson	<b>Date Applied For:</b> 06/27/2008			Zon	ing Approv	al		
	<del>_                                    </del>	Sne	cial Zone or Review	vs 7	oning Appeal		Historic Prese	rvation
1. This permit application								
Applicant(s) from meet Federal Rules.	ing applicable State and	☐ Sh	oreland	Ŭ Var	iance		Not in District	t or Landmark
		L,				1,	<del></del>	
2. Building permits do not include plumbing, Wetla		etland	Miscellaneous		{ · !	Does Not Require Review		
septic or electrical work			(01		400			
3. Building permits are vo within six (6) months of		L Fl	ood Zone	Cor	ditional Use		Requires Revi	ew
False information may i			ah direka ka	Total		١,		
permit and stop all work		🗀 Su	ibdivision	inte	rpretation		Approved	
	_	 	te Plan		•ovad		Approved w/C	Conditions
		50	ie rian	App	roved		Approved w/C	ongitions
and the second second	MITISSUED	   Maj∫	Minor MM	¬ Den	ied	1 (	Denied	
I LEAGIS		1,4100			icu			
	2000	Date: (	(nh)	Date:			6/30/08 ne: For Deb/	n. 1
UI,	N 30 5000	Date.	9/30/08	Date.		IDa	ie. Let heel	T. M
CITY	TI BALD							
1 011	AND THE RESIDENCE OF THE PARTY							
			ERTIFICATIO					
hereby certify that I am the	owner of record of the na	med pro	perty, or that the	e proposed wor	k is authorized	by the o	wner of record	l and that
I have been authorized by the urisdiction. In addition, if a	owner to make this appli	ication a	is his authorized	agent and I agi	ee to conform	to all app	plicable laws o	of this
shall have the authority to ent	er all areas covered by su	ich pern	application is iss it at any reason	able hour to en	force the provi	sion of the	he code(s) ann	licable to
such permit.		F 2.11			and provi		<b>-</b>	
SIGNATURE OF ARRIVANT	<del></del>		ABBBESS		*			
SIGNATURE OF APPLICANT			ADDRESS		DATE		PHON	IE

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

City of Portland, N	Iaine - Building or Use Permi	it	Permit No:	Date Applied For:	CBL:
•	04101 Tel: (207) 874-8703, Fax:		08-0771	06/27/2008	057 C033001
Location of Construction:	Owner Name:		Owner Address:		Phone:
98 CLARK ST	MAIER LYDIA F &	MERRITT T	98 CLARK ST		
Business Name:	Contractor Name:		Contractor Address:	Phone	
	Pollard Builders / Be	n Pollard	30 Eastern Promei	(207) 776-5711	
Lessee/Buyer's Name	Phone:		Permit Type:		
		}	Alterations - Dup	lex	
Proposed Use:		Propose	ed Project Description		
2 units building - Repair	ir/ replace rear steps	Repai	r/ replace rear steps	<b>;</b>	
	•		•		
		l			
Dept: Zoning	Status: Approved with Condition	ns Reviewer	Tom Markley	Approval I	Date: 06/30/2008
Note:	Status. Approved with Condition		. Tom Markies	Approvari	Ok to Issue:
ļ	1 212 1 22 6 24				OK to issue.
1) Stairs must be put b	eack within the existing footprint.				
2) This permit is being work.	g approved on the basis of plans subm	itted. Any devia	tions shall require a	a separate approval l	pefore starting that
Dept: Building	Status: Approved with Condition	ns Reviewer	: Tom Markley	Approval D	Date: 06/30/2008
Note:					Ok to Issue: 🔽
Application approv     and approrval prior	al based upon information provided b to work.	y applicant. Any	deviation from app	proved plans requires	s separate review

### **BUILDING PERMIT INSPECTION PROCEDURES**

Please call 874-8703 or 874-8693 (ONLY)

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- X Footing/Building Location Inspection: Prior to pouring concrete or setting precast piers
- X Final inspection required at completion of work.

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

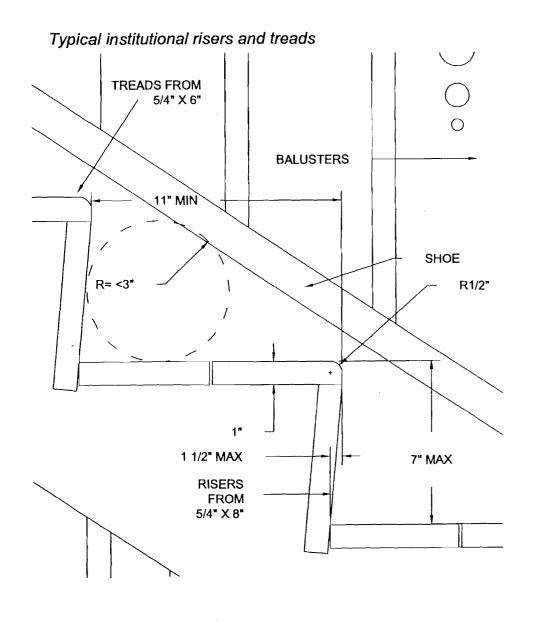
If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

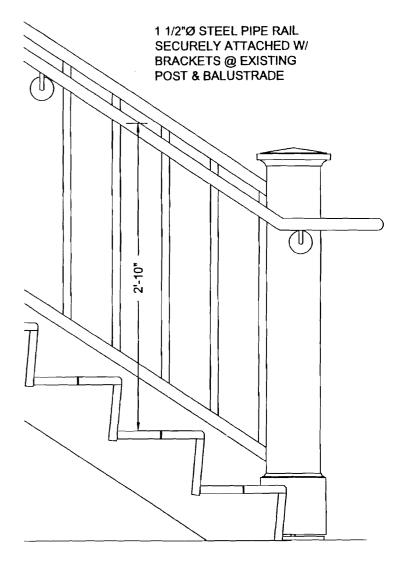
Di

CBL: 057 C033001

Building Permit #: 08-0771



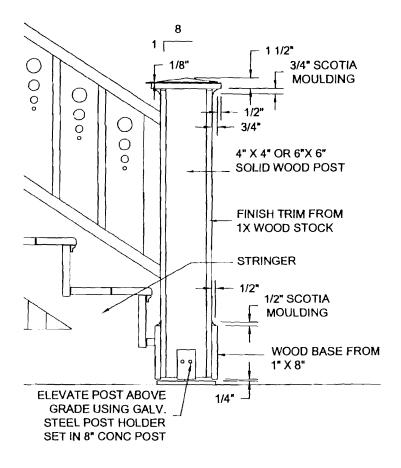
### Addition of handrail to existing stair



### STAIR DETAILS FOR RESIDENTIAL USE

# Typical residential risers and treads BALUSTERS BOTTOM RAIL TREADS FROM 5/4" X 6" RISERS FROM 5/4" X 8" 1" 1"

### Typical newel post construction



Alternate: Newel post may be bolted to a stringer.



# **General Building Permit Application**

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address of Construction: 98	Clark	St.					
Total Square Footage of Proposed Structure/A	Area	Square Footage of Lot					
Tax Assessor's Chart, Block & Lot	Applicant *n	nust be owner, Lessee or Buyer	r* Telephone:				
Chart# Block# Lot#	Name Lyaia F. Maier 233-05						
57 ( 33	1	8 Clark St.					
	City, State &	Zip Portland ME O	1102				
Lessee/DBA (If Applicable)	Owner (if di	fferent from Applicant)	Cost Of				
	Name <	same	Work: \$				
	Address		C of O Fee: \$				
	City, State &	Zip	Total Fee: \$ 40				
			Total ree. p				
Current legal use (i.e. single family)							
If vacant, what was the previous use?							
Proposed Specific use:  Is property part of a subdivision?   If yes, please name							
Project description:							
Repair/Rear Steps							
Contractor's name: Ben Pollard							
Address: 30 Eastern Prom							
City, State & Zip Portland MF	041	<b>0</b>	lephone: 773-0764				
Who should we contact when the permit is ready: Lydia Majer Telephone: 233-058							
Mailing address:							
Please submit all of the information outlined on the applicable Checklist, Failure to							

Please submit all of the information outlined on the applicable Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information or to download copies of this form and other applications visit the Inspections Division on-line at <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, or stop by the Inspections Division office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature:	Lolia	Main	Date:		une	27	7.08	)
	This is not	a permit; vou may no	t commence AN	¥	work until	the per	mit is issi	ue

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Signature of Applicant/Designee

Signature of Inspections Official

0/

CBL: 057 C033001

Building Permit #: 08-0771

7.	DICENTICA EXIMIA KING & HEARTS	1-
3.	ARUNGUS DIDICUS 'KNEIFFII'	6
4.	ASTILAE ARENDSII 'FANAL'	10
5.	HOSTA 'BIG DADDY'	4
6.	CARPINUS BETULUS FASTIGATA HORNBEAM	1
7.	OSMUNDA CINNAMOMEA 'CINNAMON FEM'	1
8,	CIMICIFUGA RACEMOSA	1
9.	MHODODENDRUN 'ROSY MIRACLES'	1
10.	PACHYSANDRA TERMINALIS	10



